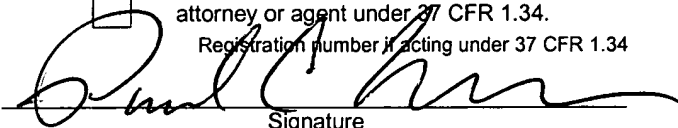


|                                                                                                                                                                                                                                                           |            |                                            |             |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|--------------------------------------------|-------------|
| <b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b><br><b>FY 2005</b><br>(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)                                                                                                |            | Docket Number (Optional)<br>1381-0284P     |             |
| Application Number<br>10/053,578-Conf. #003991                                                                                                                                                                                                            |            | Filed<br>January 24, 2002                  |             |
| For <b>PROCEDURE AND APPARATUS FOR THE INSTALLATION OF AN ELEVATOR</b>                                                                                                                                                                                    |            |                                            |             |
| Art Unit<br>3652                                                                                                                                                                                                                                          |            | Examiner<br>T. V. Tran                     |             |
| This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.<br>The requested extension and fee are as follows (check time period desired and enter the appropriate fee below): |            |                                            |             |
|                                                                                                                                                                                                                                                           | <u>Fee</u> | <u>Small Entity Fee</u>                    |             |
| <input type="checkbox"/> One month (37 CFR 1.17(a)(1))                                                                                                                                                                                                    | \$120      | \$60                                       | \$          |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2))                                                                                                                                                                                                   | \$450      | \$225                                      | \$          |
| <input type="checkbox"/> Three months (37 CFR 1.17(a)(3))                                                                                                                                                                                                 | \$1020     | \$510                                      | \$          |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4))                                                                                                                                                                                                  | \$1590     | \$795                                      | \$          |
| <input checked="" type="checkbox"/> Five months (37 CFR 1.17(a)(5))                                                                                                                                                                                       | \$2160     | \$1080                                     | \$ 2,160.00 |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.                                                                                                                                                                           |            |                                            |             |
| <input checked="" type="checkbox"/> A check in the amount of the fee is enclosed.                                                                                                                                                                         |            |                                            |             |
| <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.                                                                                                                                                                               |            |                                            |             |
| <input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.                                                                                                                                |            |                                            |             |
| <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>02-2448</u> . I have enclosed a duplicate copy of this sheet.                     |            |                                            |             |
| I am the <input type="checkbox"/> applicant/inventor.                                                                                                                                                                                                     |            |                                            |             |
| <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71.<br>Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).                                                                                                     |            |                                            |             |
| <input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>32,334</u>                                                                                                                                                        |            |                                            |             |
| <input type="checkbox"/> attorney or agent under 37 CFR 1.34.<br>Registration number if acting under 37 CFR 1.34 _____                                                                                                                                    |            |                                            |             |
| <br>Signature                                                                                                                                                          |            | September 27, 2006<br>Date                 |             |
| Joe McKinney Muncy<br>Typed or printed name                                                                                                                                                                                                               |            | #43,368 (703) 205-8026<br>Telephone Number |             |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.                                                     |            |                                            |             |
| <input type="checkbox"/> Total of <u>1</u> forms are submitted.                                                                                                                                                                                           |            |                                            |             |

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